7 april

POPULATION CENSUS, 1960

Form 1 – HOUSEHOLD SCHEDULE

ANTIGUA, BRITISH VIRGIN ISLANDS, CAYMAN ISLANDS, MONTSERRAT, ST. CHRISTOPHER–NEVIS–ANGUILLA, TURKS AND CAICOS ISLANDS

Initials Date

Filled up by .. ..

Checked by .. ..

NOTE:– The information to be entered on this Schedule is information required under Census Orders. The contents of the Schedule will be treated as strictly confidential and will be used for no other purpose than the preparation of statistical tables. No information about any individual person will be disclosed. The Laws of the Territories provide severe penalties for any disclosure of census information to unauthorised persons.

***The symbol (*) is used to indicate that further instructions are to be found in the Enumerator's Manual.**

FINAL NUMBER OF PERSONS ENUMERATED IN THIS HOUSEHOLD	Males	Females	Total
1. Usually resident here and here on census night			
2. Usually resident here and absent on census night ..			
3. Others here on census night, residents of this Territory ..			
4. Others here on census night non-residents of this Territory			
Total persons at final enumeration			

DWELLING OR LIVING QUARTERS OCCUPIED BY THIS HOUSEHOLD *(PRIVATE HOUSEHOLDS ONLY)*

priate description. Use figures only for No. of rooms and rentals. Write descriptions only when the particular type, etc. is not provided for.

4. DATE OF BUILDING*	5. WALL MATERIAL	6. TENANCY OF DWELLING	7. TENANCY OF LAND	8. FOR RENTED DWELLING ONLY* Rental	9. (ONLY WHEN LAND IS RENTED SEPARATELY) Land rent	10. WATER SUPPLY	11. TOILET FACILITY	12. ELECTRICITY
☐ Before 1940 ☐ 1940 to 1955 ☐ 1956 ☐ 1957 ☐ 1958 ☐ 1959 ☐ 1960	☐ Stone ☐ Brick ☐ Concrete or concrete block ☐ Wood ☐ Wattle and daub Other.....	☐ Owned by occupier ☐ Rented from Gov't ☐ Rented privately ☐ Rent-free employee ☐ Other rent-free	☐ Owned by occupier ☐ Not rented separately ☐ Rented separately from Government ☐ Rented separately from private owner	$..... per	$..... per	☐ Public piped into dwelling* ☐ Public piped into yard ☐ Public standpipe ☐ Public tank ☐ Private piped into dwelling ☐ Own catchment not piped ☐ Stream ☐ Pond ☐ Well	☐ Flush, exclusive use ☐ Flush, shared ☐ Pit, exclusive use ☐ Pit, shared ☐ Other, exclusive use ☐ Other, shared ☐ No facility	☐ Public supply ☐ Private supply ☐ None

NAME AND PARTICULARS OF EVERY PERSON IN THIS HOUSEHOLD

stions are not applicable, enter a dash (–). Write "0" for ages or periods less than one year, (in Col. 6, Col. 11b or Col. 13) and for zero numbers of children (in Col. 8 or Col. 10).

RELATIONSHIP TO HEAD OF HOUSEHOLD – e.g., wife, common-law wife, son, son-in-law, visitor, servant *(See note)*	SEX M or F	AGE Years at last birthday	LEGAL MARITAL STATUS If aged 14 or over *(See note)*	FEMALES AGED 14 & OVER: Children ever born, excluding still-births	FEMALES AGED 14 & OVER: Age when first child born	FEMALES AGED 14 & OVER: Any birth since 1st April 1959 *(See note)*	FEMALES AGED 14 & OVER: UNION STATUS *(See note)* Type M, CL, EX, or NIL	FEMALES AGED 14 & OVER: UNION STATUS *(See note)* Duration years	BIRTHPLACE If in this Territory, write parish, town or Island; if abroad, write name of Island or Territory *	PERIOD OF RESIDENCE *(See note)* in this parish town or island	PERIOD OF RESIDENCE *(See note)* In this Territory	RACE OR ETHNIC ORIGIN *(See note)*	RELIGION If Christian, write denomination. If other, write HINDU, MUSLIM, JEWISH, etc.*	IF AGED 10 OR OVER: EDUCATION LEVEL If primary only, write number of years of primary school completed; if above primary, see note.	IF AGED 10 OR OVER: ABILITY TO READ AND WRITE *(See note)*	NAME OF SCHOOL NOW ATTENDED (For persons aged 5 and under 25) If not attending full-time at any school write NIL	FOR PERSONS AGED 14 AND OVER: Main Occupation etc. Over Past Year: OCCUPATION Kind of work done. If no gainful occupation, see note	FOR PERSONS AGED 14 AND OVER: Main Occupation etc. Over Past Year: STATUS *(See note)*	FOR PERSONS AGED 14 AND OVER: Main Occupation etc. Over Past Year: INDUSTRY Kind of business in which engaged or employed. If none, write NIL*	SUBSIDIARY CULTIVATION OR FISHING *(See note)*	ACTIVITY IN WEEK ENDING MARCH 12TH *(See note)*	AREA OF FARM OR SMALL PLOT OPERATED *(See note)*
(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11a)	(11b)	(12)	(13a)	(13b)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)

NFIDENTIAL

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SECTION I

County/Parish/Quarter.....

Ward *(if applicable)*.....

Enumeration District Number.....

Type of Area.....

Schedule Number.....

No. of Rooms.....

Address of Household/Building.....

.....
Town/District/Locality

TYPE OF CARD	SECTION II — Coder.....						SECTION III
2	Surname and main Christian Name	Relationship	Sex	Age Last Birthday — yrs. and months as fractions of a year for children under 2 years of age	Race or Ethnic Origin — N W I CH M P A C S O	Religion — enter as stated by respondents	Birthplace — If in this town/locality write 'here'. If elsewhere in this territory give town or locality and name of nearest town. If abroad, give name of country only.
INDIVIDUAL NO.							
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
01							
02							
03							
04							
05							
06							
07							
08							
09							
10							

INDIVIDUAL NO.	REMARKS

EASTERN CARIBBEAN REGION - TRINIDAD AND TOBAGO

1

POPULATION CENSUS 7th APRIL, 1960

(One Schedule to be completed for each household, one line for each individual)

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istrict/Locality

FOR OFFICE USE ONLY

No. of Families or Domestic Units.....

No. of Persons per Room.....

Type of Household.....

SECTION II						SECTION III Coder.....			SECTION IV Coder.....			FOR WOMEN ONI			
e and main ian Name (2)	Relationship (3)	Sex (4)	Age Last Birth-day yrs. and months as fractions of a year for children under 2 years of age (5)	Race or Ethnic Origin N W I CH M P A C S O (6)	Religion enter as stated by respondents (7)	Birthplace If in this town/locality write 'here' If elsewhere in this territory give town or locality and name of nearest town. If abroad, give name of country only. (8)	Normal Residence If in this town/locality write 'here' If elsewhere give town/ locality and name of nearest town. NOTE! For persons born abroad, normal residence is where they normally live in this Territory. (9)	Years of Resi-dence If local born length of stay in present resi-dence If Foreign born length of stay in this territory (10)	Highest Level of Education Attained incl. children still at school Std. 1 to Std. 7 S.C. N.S.C. U.D. U.N. E.F.C. None (11)	If attending school, give name and denomination of the school in which enrolled (12)	Mar-ital Sta-tus M W D SP NM (13)	Total No. of chil-dren born alive (incl. those born alive who have since died) (14)	Age of mother at birth of last child born alive (15)	Did you have any chil-dren born alive dur-ing the past 12 mths Yes or No. If Yes of what sex M F (16)	T U If u give If o give at a Typ of Unic M C.L V S N (17)

REMARKS	INDIVIDUAL NO.	

REGION - TRINIDAD AND TOBAGO 1

CENSUS 7th APRIL, 1960

r each household, one line for each individual)

British Guiana
Trinidad + Tobago
Barbados
Windward Islands

To be implemented by a short Housing Questionnaire in Territories other than Trinidad + Tobago

OFFICE USE ONLY

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Date of Preliminary Enumeration.....

Enumerator.....

Checked by Supervisor.....

Checked in Office.....

FOR OFFICE USE ONLY

Total Number of persons

Total Number of families

SECTION IV Coder.....

est Level Education ttained	If attending school, give name and denomination of the school in which enrolled	Marital Status	FOR WOMEN ONLY				
			Total No. of children born alive (incl. those born alive who have since died)	Age of mother at birth of 1st child born alive	Did you have any children born alive during the past 12 mths Yes or No. If Yes of what sex	TYPE OF UNION If under 45 give present type If over 45 give type at age 45	
						Type of Union	Duration of type
children still school		M			M	M	
, 1 to Std. 7		W			F	C.L.	
S.C.		D				V	
N.S.C.		SP				S	
U.D.		NM				N	
U.N.							
E.F.C.							
None							
(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)

SECTION V Coder.....

Main Activity during past 12 mths	How many months did you work during the past 12 mths (incl. vacation and sick leave)	Did you work for the first time during the past 12mths (Yes/No.)	Type of Job in which engaged for Most of the Time during the past 12 months. Record in detail	(a) Name of person or firm by whom employed for most of the past 12 mths. (b) Type of business carried on by employer	Occupational status during past 12mths	Did you have a job during the past week
W					PE	Yes
HD					OA	
S					EM	No.
R					UA	
V					FW	E.
NW						U.
(19)	(20)	(21)	(22)	(23)	(24)	(25)

	INDIVIDUAL NO.	REMARKS